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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

18U 101 R1

First Named Inventor

Shu et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Human Tbx20 Gene and Uses

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable).

Application Number

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
| | | |

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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OR ☐

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Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

Youmin

Family Name

Shu

(first and middle [if any])

or Surname

Inventor's
Signature

Youmin Shu

Date

2/26/02

Residence: City

Potomac

State

MD

Country

USA

Citizenship

USA

Mailing Address

2508 Chilham Place

Mailing Address

City

Potomac

State

MD

ZIP

20854

Country

USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

Wufang

Family Name

Fan

(first and middle [if any])

or Surname

Inventor's
Signature

Wufang Fan

Date

2-25-02

Residence: City

Germantown

State

MD

Country

USA

Citizenship

USA

Mailing Address

18452 Crownsgate Circle

Mailing Address

City

Germantown

State

MD

ZIP

20874

Country

USA

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box ☐

PTO/SB/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

| | | | |
|--|----------------|---|-----|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Karl F. | | Kovacs | |
| Inventor's Signature <i>Karl F Kovacs</i> | | Date <i>2-26-02</i> | |
| Residence: City | Rockville | State | MD |
| Country | USA | Citizenship | USA |
| Mailing Address | | | |
| 5 Gruenther Court | | | |
| Mailing Address | | | |
| City | Rockville | State | MD |
| ZIP | 20851 | Country | USA |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Xuan | | Li | |
| Inventor's Signature <i>Xuan Li</i> | | Date <i>2/26/02</i> | |
| Residence: City | Silver Spring | State | MD |
| Country | USA | Citizenship | USA |
| Mailing Address | | | |
| 14808 Carona Drive | | | |
| Mailing Address | | | |
| City | Silver Spring | State | MD |
| ZIP | 20905 | Country | USA |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Gilbert | | Jay | |
| Inventor's Signature <i>Gilbert Jay</i> | | Date <i>02-26-02</i> | |
| Residence: City | North Bethesda | State | MD |
| Country | USA | Citizenship | USA |
| Mailing Address | | | |
| 5801 Nicholson Lane | | | |
| Mailing Address | | | |
| City | North Bethesda | State | MD |
| ZIP | 20852 | Country | USA |

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| | |
|------------------------|---------------------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | SHU et al. |
| Title | Human Tbx20 Gene and Uses |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 18U 101 R1 |

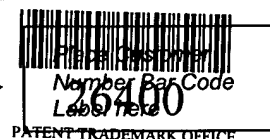
I hereby appoint:

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|-------------------|
| Name | Youmin Shu |
| Signature | <i>Youmin Shu</i> |
| Date | 2/26/02 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|------------|
| Name | Wufang Fan |
| Signature | |
| Date | 2-25-02 |

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| Country | | | |
| Telephone | Fax | | |

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SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|---------|
| Name | Xuan Li |
| Signature | |
| Date | 2/26/02 |

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Title

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Group Art Unit

Examiner Name

Attorney Docket Number

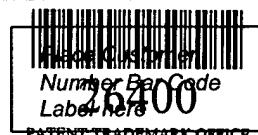
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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Karl F. Kovacs IV

Signature

Karl F. Kovacs IV

Date

2-26-02

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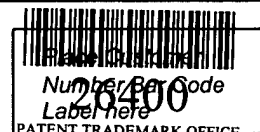
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| Examiner Name | |
| Attorney Docket Number | 18U 101 R1 |

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| <input type="checkbox"/> Firm or Individual Name | | | |
| Address | | | |
| Address | | | |
| City | State | Zip | |
| Country | | | |
| Telephone | Fax | | |

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|--------------------|
| Name | Gilbert Jay |
| Signature | <i>Gilbert Jay</i> |
| Date | 02-26-02 |

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